

brain biopsy is the definitive investigation for unidentified intracerebral lesions is not mentioned. The diagnostic use of serum cryptococcal antigen is omitted and fungal infections should be included in the differential diagnosis of brain abscesses—especially in IVDUs. The impression is given that MAI causes TB and that brain haemorrhages are unrelated to HIV status (the patient may have ITP). Cholangitis may be due to CMV as well as cryptosporidia.

According to the back cover this book is "particularly applicable to candidates for postgraduate examinations in radiology." I think that statement satisfactorily accounts for the wealth of technical detail in some of the discussions. Some of the investigations and what they portrayed were not immediately clear to me although I could usually guess the correct diagnosis from the history.

From the point of view of a clinician I would say that one of the main values of this book is its potential for increasing understanding of those unfamiliar and otherwise unintelligible investigations that often get flashed up at ward rounds. I have learnt more about what radiologists are looking for in these tests, the differential diagnoses of patterns seen and appropriate diagnostic strategies, that is, what will show up on which test.

I would therefore recommend this book to genitourinary physicians in training and to anyone else who is "trained" but would like to expand their knowledge of HIV radiology.

MELINDA TENANT-FLOWERS

The Lovers' Guide III. A Stanway. Pickwick Videos, 18, £14.99.

Subtitled "Better Orgasms", Dr. Andrew Stanway introduces the third and final video of the series with a Safer Sex Warning. This is delivered in print against a forcefully dramatic silence. (For Videos I and II see *Genito-Urinary Medicine*, 1992;68:67 and 427-8.)

Orgasm is defined simply as release from sexual tension. This is supplemented with comments on its physical and emotional dimensions. For some it is a tearful and/or spiritual experience. As usual, Dr. Stanway proceeds in an orderly and logical way to show how orgasm in women and men, alone or in partnership, may improve their lovemaking and orgasms. His pleasantly relaxed manner is complemented by six couples. Unhindered by clothing or inhibitions they actively illustrate the advice.

Women are first to be addressed. In all ways they are declared more diverse and complex in their sexual needs. This view is largely based on Dr. Stanway's many conversations with them. One quickly gathers from his teaching, both directly, and indirectly through men, that women are likely to be the greater beneficiaries of his endeavours. One by one the historical prejudices and attitudinal barriers are tackled and breached. This "mind thing" is seen as presenting in a variety of ways. Firstly, the shyness or mock modesty that means hanging on to one's own integrity; secondly, as fear in some women that they may lose control. By surrendering a body they are unhappy with, to enjoyable sex and orgasm, seems to alarm others.

Learning to talk the language of lovers is the most helpful way to an open mind. The joys of tranquil post-coital pillow talk awaits discovery for many. Dishonesty, like that involving faked orgasm is dangerous. It delays discovery of likes and dislikes and the development of a modicum of selfishness which comes to benefit not only the woman but her lover. No vocal, auditory, visual or tactile nuance is neglected. Switching pleasures in mutual stimulation is explored in detail as is clitoral contact. Much is made of the female plateau of excitement as having potential for a variety of ways to orgasm, repeatably for some. For Dr. Stanway, intercourse is not enough. For many women better orgasms, more regularly, come from learning and practising a wide variety of sexual activities. All these are discussed and demonstrated.

In contrast to women, orgasm in men appears to be more urgent, vital and essential in both procreational and recreational sex. Learning to extend the plateau period and so delay and heighten orgasm calls for knowledge and experience. (Declaring a young man a poor lover, we are told, takes only two minutes!) The secret lies in a detailed understanding of men's sexual physiology and this is detailed. Learning the needs of women as well as their own is every man's main contribution to better orgasms.

Thus it is apparent that hope of a healthy, happy and fulfilling sex life starts with a partner willing, and gently enabled, to participate unhurriedly in the initial phase of emotional give and take. With the scene thus set progress moves to the mutual exchange of physical pleasure that soon ensures equality of sexual activity. Progress over time thus establishes a broad, uninhibited repertoire. Such variety offers the best hope of a long, sincere and trusting relationship.

This series of thoroughly comprehensive videos is well worthy of its popularity. Coming as it does in a year when Sexual Health is declared a priority objective it is also timely. When Safer Sex sees wisdom in monogamous relationships, quality rightfully has a place. It is time that Dr. Stanway's contribution to the Sexual Health year was recognised by the BMA Library and Bookshop.

R S MORTON

Work Roles and Responsibilities in Genitourinary Medicine Clinics. By Isobel Allen and Debra Hogg. London. Policy Studies Institute. (pp 238. £14.95) 1993. ISBN 085874-5706.

Here is a major piece of research which should be available in every genitourinary medicine clinic in the land. The authors have picked up where the Monks Report¹ left off, investigating the roles and responsibilities of doctors, nurses, health advisers and administrative and clerical staff in genitourinary medicine (GUM) clinics.

Twenty clinics have provided the authors with rich material including 269 interviews with staff. Qualitative detail enlivens the text throughout. And, as in clinics themselves, all of life is here: the health adviser whose qualification is in hairdressing, the doctors shouting "it's your willy" in rooms without soundproofing, the receptionists

who are as grim as their surroundings and the clinic which plays Barry Manilow twenty times a day.

Along with the esoteric is the idiosyncratic. At times there seem to be as many ways of running a GUM clinic as there are clinics. Careers are unplanned and training haphazard, while roles and responsibilities of various grades interchange and overlap ad hoc. Even KH 09 and KC 60 data are inconsistently gathered.

Despite all of this and the disappointing if unsurprising finding that Monks Report¹ recommendations are not yet in place, this is an invigorating read. In the modern culture of business planning it is vital that we know ourselves. The voices in the text echo sentiments which will be familiar to many within the specialty.

Clinics and their staff must be clear about what they do and who does what. Genitourinary medicine work needs to be properly defined, with the right balance of appropriately trained staff available to do it. Counselling, partner notification, HIV/AIDS work and health education/promotion require particular attention. Many clinics are housed in poor accommodation which needs urgent improvement.

All grades of staff should have access to this readable book which provides a platform for change in genitourinary medicine. Its 43 recommendations, if debated and implemented will take GUM clinics out of the closet and into the next century, ready to tackle the sexual health needs of the nation. This is essential reading.

M JONES

1 Department of Health (1988). Report of the Working Group to Examine Workloads in Genitourinary Medicine Clinics. (The Monks Report).

ABC of AIDS, 3rd ed, by M W Adler. (Pp 86, £12.95) Pub BMA 1993. ISBN 0-7279-0761-1.

The latest edition of this eminently readable slim volume provides a perfect introduction to the subject for medical students, doctors, and related professionals. One extra chapter has been added: *HIV infection and AIDS in the Developing World* by Kevin De Cock. Prof. Michael Harrison, Dr. Robert Miller, and Pat Wright are the new authors of chapters on *Neurological Aspects*, *AIDS and the Lung*, and *Nursing Care*, respectively. Other chapters have been updated. Epidemiological data are included up to December 1992. The rather gloomy new conclusion to the chapter on immunology is that "In any case, we need to know more about immune responses to HIV before the rational design of a vaccine can become possible".

I have a couple of minor quibbles, which is not a bad statistic for any book. Firstly, the table on transmission of the virus queries whether breast milk is a vehicle for transmission. However, in a later chapter, it is stated "In children born to women who are infected prenatally, it has been estimated that the additional risk of infection, through breastfeeding, over and above the transmission in utero and at delivery, is about 15%". Secondly, in the chapter on *Strategies for Prevention* it now states flatly *departments of genitourinary medicine now try to encourage all male and female patients to be tested*. Not so, according to my mini-survey